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ABSTRACT

This brief report cites data that indicate the need for increased efforts to achieve the first of six National Education Goals proposed by the President and the Governors in 1990. The first goal states that "By the year 2000, all children in America will start school ready to learn." The grade given to goal 1 is "incomplete" because of insufficient data. Only half of all children with disabilities ages 3-5 attend preschool programs. This conclusion is based on unpublished tabulations from the Early Childhood Component of the 1991 National Household Education Survey. Services for children age 5 or younger who have special needs are being expanded yearly in view of estimated increases in numbers of children needing services. In 1990-91 approximately 400,000 children with disabilities, ages 3-5, participated in preschool special education progams and approximately 200,000 infants and toddlers, ages 0-2 years participated in early intervention programs. The report briefly outlines services available for young children with disabilities, the number of children receiving services and their geographic distribution, parent involvement, nutritional and health needs, and the need for additional information. (JDD)

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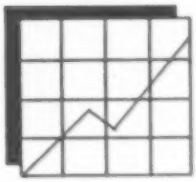
Starting School Ready to Learn

National Education Goal 1 and Students with Disabilities



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BRIEF REPORT
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National Center on Educational Outcomes

The College of Education
UNIVERSITY OF MINNESOTA

March, 1992

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National Education Goal 1

"By the year 2000, all children in America will start school ready to learn."

Objectives:

- All disadvantaged and disabled children will have access to high quality and developmentally appropriate preschool programs that help prepare children for school.
- Every parent in America will be a child's first teacher and devote time each day helping his or her preschool child learn; parents will have access to the training and support they need.
- Children will receive the nutrition and health care needed to arrive at school with healthy minds and bodies, and the number of low birthweight babies will be significantly reduced through enhanced prenatal health systems.

From: The National Education Goals Report 1991: Building a Nation of Learners (Executive Summary). Washington, DC: National Education Goals Panel

Our nation has been given a grade of **INCOMPLETE** on the first of the six national education goals proposed by the President and the governors in 1990. The Goals Panel concluded that while there presently are no direct ways to measure the nation's progress toward achieving this goal, indirect data do exist. Information can be found on child health and nutrition, family activities, and preschool programs.

Goal 1 is the only goal for which the Goals Panel has presented information on children with disabilities. The Panel concluded that only half of all 3- to 5-year-olds with disabilities attended preschool programs. This conclusion was based on unpublished tabulations from the Early Childhood Component of the 1991 National Household Education Survey, which asked parents or guardians of first and second graders about the participation of the children in education programs before first grade and the children's disability status. The extent to which parents' perceptions of disability and "educational" program match those that are used by service providers is unknown, resulting in somewhat suspect information for Goal 1.

Attention to young children with disabilities is important for our nation, in part because of the projected increases in numbers of these children in the future. Among possible growing constituencies for early special education services are:

- ✓ Children infected with HIV virus (AIDS)
- ✓ Children prenatally exposed to alcohol or drugs
- ✓ Medically fragile and low birthweight infants
- ✓ Children exposed to lead, pesticides, and other environmental hazards
- ✓ Children who are poor and/or homeless

The purpose of this Brief Report is to highlight what we do know about young children with disabilities in relation to Goal 1 of the six national education goals.

- ✓ **What** services are available?
- ✓ **Who** receives these services?
- ✓ How are **parents** involved in the preschool education of their children with disabilities?
- ✓ Are the **nutritional and health needs** of these children met before they start school?
- ✓ Are these children **ready for school**?
- ✓ What do we still **need to know**?

SERVICES FOR YOUNG CHILDREN

Services for children age 5 or younger who have special needs are being expanded yearly in view of estimated increases in numbers of children needing services.

- ✓ Children ages **3-5 years** have access to services through statewide programs designed to provide an array of nutritional, psychological, and educational services to all 3-5 year old children with disabilities. These programs are in place in all states and other educational entities.

- ✓ Children ages **birth-2 years** have access to programs through Part H of the Individuals with Disabilities Education Act (IDEA). States and other educational entities are currently in various stages of implementation of these programs.

NUMBERS RECEIVING SERVICES

Participation in programs for younger children with disabilities is increasing each year. In 1990-91:

- ✓ Approximately 400,000 children with disabilities, ages 3-5, participated in preschool special education programs.

- ✓ Approximately 200,000 infants and toddlers (0-2 years) participated in early intervention programs.

The percentages of young children involved in early intervention and preschool services show some regional differences. Variations among individual states are much greater, ranging from 0.3% to 8.8% for 0-2 year olds and from 1.6% to 6.8% for 3-5 year olds.

Census Region	0-2 Years	3-5 Years	Total
East North Central (OH, IN, IL, MI, WI)	1.4	3.8	2.6
East South Central (KY, TN, AL, MS)	1.5	4.7	3.1
Middle Atlantic (NY, NJ, PA)	1.4	3.8	2.6
Mountain (MT, ID, WY, CO, NM, AZ, UT, NV)	1.8	3.1	2.5
New England (ME, NH, VE, MA, RI, CT)	1.9	4.5	3.2
Pacific (WA, OR, CA, AK, HI)	2.1	3.0	2.5
South Atlantic (DE, MD, VA, WV, NC, SC, GA, FL)	3.3	3.4	3.4
West North Central (MN, IA, MO, ND, SD, NE, KS)	1.0	3.4	2.2
West South Central (AR, LA, OK, TX)	0.7	3.2	2.0

Source: Tables 2.2 and AA1 of the Fourteenth Annual Report to Congress (U.S. Department of Education, 1992). Percentages for regions are based on the total numbers for the regions. Population counts are based on 1990 Census Data from the Bureau of the Census.

PARENT INVOLVEMENT

Parent involvement in the development of programs for young children with disabilities is encouraged through procedures defined by the service programs.

IEPs - Individualized Educational Plans are required for services provided to 3-5 year old children with disabilities, just as they are requried for school-age children with disabilities. The IEP must specify educational goals and objectives, and a plan for evaluating progress.

IFSPs - Individualized Family Service Plans are required for services provided to 0-2 year old children with disabilities and their families. The IFSP must specify both the child's and the family's needs and strengths, the major outcomes expected, and a plan for evaluating progress.

NUTRITIONAL AND HEALTH NEEDS

Some states are identifying biological and environmental risk factors in 0-2 year old children who will receive services. Examples of some of these are:

Biological Risk Factors	Environmental Risk Factors
Low birthweight (<1000 grams)	Parent age < 15 years
Traumatic illness	High level of family disruption
Feeding dysfunction	Poor nutrition
Brain infection	Child abuse
Positive maternal HIV	Lack of prenatal care

Estimates of the incidence of these and other risk factors in preschool children with disabilities are not available. The extent to which nutritional and health needs are met in children with special educational needs also is unknown.

READINESS FOR SCHOOL

The readiness for school of children who have been served in early intervention and preschool programs is not assessed by states at this time. There have been some state studies (e.g., Colorado) with results suggesting that a significant portion of children who receive preschool special education services no longer need specialized services or need only support services when they start school. Still, we lack adequate state or national data to assess the readiness for school of students with disabilities.

WHAT WE STILL NEED TO KNOW

It is especially important that we know about the progress that young children with disabilities are making toward being ready for school. As identified by the National Education Goals Panel in their 1991 Goals Report and redefined after subsequent Goal 1 Resource Group Reports, we need, at the least, information on five dimensions of early learning and development: physical well-being and motor development; social and emotional development; approaches toward learning; language usage; and cognition and general knowledge.

Because of the special needs of infants and young children with disabilities, and the special nature of programs for them, **additional information** is desirable, including information on

- ✓ Nutritional and health needs
- ✓ Incidence of poverty and homelessness
- ✓ Extent of parental involvement in programs

Further, we must not exclude infants and young children with disabilities from any national early childhood assessment system that is developed in response to the recommendation of the Goal 1 Resource Group. We will only know about the readiness for school of young children in our nation if we **include all** children in this assessment system.

Information Source

U.S. Department of Education. (1992). Fourteenth annual report to Congress on the implementation of the Individuals with Disabilities Education Act. Washington, DC: Author.

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The National Center on Educational Outcomes (NCEO) was established in October, 1990 to work with state departments of education, national policy-making groups, and others to facilitate and enrich the development and use of indicators of educational outcomes for students with disabilities. The Center represents a collaborative effort of the University of Minnesota, the National Association of State Directors of Special Education, and St. Cloud State University. The Center is supported through a Cooperative Agreement with the U.S. Department of Education, Office of Special Education Programs (H159C00004). Opinions or points of view do not necessarily represent those of the U.S. Department of Education or Offices within it.

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